ALLOWANCE HOT LIST

| Appl. No. | 10/629, 195 Prepared by 21/19 TC E1Kins Date 9-9-86 |
|---------------------------|---|
| Examiner- | TC ETKINS Date 9-9-8C |
| | |
| JACKET: | |
| XES NO VES NO | Primary Examiner box complete. Issuing Classification complete. |
| PTO-892/1 | 449: |
| YES NO YES NO | Examiner's initials or cross-through lines supplied for each item cited by applicant. Date(s) supplied/complete on all PTO-1449/892 sheets. (Month and year required.) |
| SPEC: XES NO XES NO | Brief Description of Drawings includes description of each figure in drawings. Continuing data is mentioned in 1 st paragraph. (Can be an insert.) |
| CLAIMS: | |
| YES NO | Claims listed on Notice of Allowability match allowed claims and/or index of claims Claims correctly numbered in index. (No duplicate or missing claim numbers.) (No incorrect dependencies.) |
| CRFE: YES NO | If necessary (biological sequence listing). |
| NOTICE O | Fither Box No. 3 (drawings accepted) or Box No. 8 (corrected drawing request) has |
| VES NO | Fither Box No. 3 (drawings accepted) or Box No. 8 (corrected drawing request) has |